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Dr. Harold Varmus
American Cancer Society
Medicine - Dept of Microbiology and Immunology
University of California
San Francisco, California 94143

Dear Dr. Varmus:

Thank you very much for your letter. I am very pleased to be included in the group that you are polling on the matter of naming the AIDS retrovirus.

I agree that the terms AIDS and lymphadenopathy should be avoided. For one thing, as you point out, the terms may be frightening. For another thing, it is not clear that these are the only conditions caused by this specific retrovirus (or family of retroviruses) and doesn't take into account the asymptomatic carriers and those patients with other phenotypic expressions such as ITP.

Our group has been using the term HTLV3 for the virus, and although this is quite a mouthful, I think it is far preferable to using the term "AIDS virus". I think this term is a bad one and should be avoided; otherwise, I expect there will be a lot of needless anxiety. At least at the moment, we can explain to patients that, although HTLV3 is the cause of AIDS, carrying the virus doesn't necessarily mean that one will get the disease. I strongly recommend that the term HTLV3 be retained because it is now familiar to most of us. "Lymphadenopathy associated virus" should perhaps be avoided because not all patients develop lymphadenopathy syndrome.

I hope these thoughts will be of some use to you, and thank you again for soliciting my input concerning this very difficult problem. I wish you the best of luck in your efforts.

Yours sincerely,

H. Wass
H. Wass, M.D.

HW/fh